

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

## OIL CONSERVATION DIVISION

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-015-29310

Indicate Type of Lease

STATE ☐

FEE ☐

State Oil & Gas Lease No.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

Name of Operator  
Pogo Producing Company

Lease Name or Unit Agreement Name

Harroun 15

Address of Operator  
P. O. Box 10340, Midland, TX 79702-7340

Well No.  
5

Pool name or Wildcat  
Pierce Crossing Delaware, East

Well Location

Unit Letter B : 330 Feet From The North Line and 1650 Feet From The East Line

Section 15 Township 24S Range 29E NMPM Eddy County

Elevation (Show whether DF, RKB, RT, GR, etc.)

2930' GR

11

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Plug back from Bone Springs to Delaware ☒

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

11/22/97 Latch onto RBP @ 7462' & POOH. Set CIBP @ 6770'. Perf Delaware 6448'-82' (34 - .38" dia holes), 6518'-24' (12 - .38" dia holes).

11/23/97 Acdz Delaware w/ 1000 gals 7-1/2% HCL. Swab test.

11/24/97 Swab test.

11/27/97 Frac w/ 77,500# 16/30 sand. Flow back well.

11/28/97 Circ well clean. Swab test.

12/01/98 Run production equipment. Put well on pump.

MAR 1998  
RECEIVED  
OCD - ARTESIA

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Barrett L. Smith TITLE Senior Operations Engineer DATE 03-20-98

TYPE OR PRINT NAME Barrett L. Smith

TELEPHONE NO. (915)685-8100

(This space for State Use)

APPROVED BY Jim W. Green TITLE District Supervisor DATE 4/9/98

CONDITIONS OF APPROVAL, IF ANY: